

Required by s. 115.95-115.996, Wis. Stats. and PI 13.

INSTRUCTIONS: Complete three copies. Retain one copy in district. Return **original** and **one copy** by **August 15**, to:

WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION ATTN: TOLU SANABRIA BILINGUAL-BICULTURAL EDUCATION P.O. BOX 7841 MADISON, WI 53707-7841

	l.	GENERAL INFORMATION			
Applicant School Board				LEA Code	School Year
					2006-2007
Mailing Address Street, City, State, Zip					
Contact Person		Title		Telephone Are	ea/No.
Contact Person's E-Mail Address				Fax Area/No.	
	II. ASS	SURANCES All must be checked			
The applicant assures that funds granted as a accordance with all applicable laws, regulations				t forth in this P	lan of Services and ir
2. The applicant assures that each limited-English each pupil shall have full access to support se pupil services, available to other pupils in the di	rvices suc	ch as, but not limited to, language de			
3. The applicant assures compliance with civil right of the Civil Rights Act of 1964, Section 504 of applicant agrees not to discriminate against incomplicants for employment under this program	the Reha	abilitation Act of 1973 and s. 118.13	Wis. Stats. ar	nd PI-9 Pupil N	ondiscrimination. The
4. The applicant encourages the attendance of sponsored meetings.	f the loca	al Bilingual-Bicultural program admi	nistrator (or	their designee)	at two department-
5. The applicant will share project experiences, a upon request.	ictivities, a	and materials on a cost recovery bas	sis with other	interested Wisc	consin school districts
6. The applicant will submit on or before Augus PI 13.06 (2). The applicant agrees to keep reco		·		•	
7. The applicant assures that the local Bilingua Services to determine if they are allowable callowable costs.		. •	•	•	
8. The applicant assures that the Bilingual-Bicultu determine if certification is current and approp				acher and cour	nselor licenses held to
9. The applicant will file financial reports and cl Management Services of the Wisconsin Depart			procedures p	rescribed by th	ne Bureau for Schoo
10. The Department of Public Instruction will reserve the Plan period. In the event of an overpaym amount of such overpayment.	-		•	•	
		III. SIGNATURES			
Name of Program Administrator	Sig	nature of School Program Administra	tor	Date Si	gned
	>				
Name of District Administrator	Sig	nature of School District Administrate	or	Date Si	gned
	>				

IV. DISTRICTWIDE STAFF TOTALS

In this section, use full-time equivalencies (FTEs) to report all staff eligible for reimbursement under s. 115.95-115.996 Wis. Stats. and PI-13. Note: Only staff who are properly licensed **and** working with eligible pupils should be listed here. Eligible pupils are those who are LEP and enrolled in a program with the triggering numbers of students in a language at each grade level.

Number of	PK	К-3	4-8	9-12	Districtwide
Licensed Teachers					
Teacher Assistants/Aides					
Bilingual Counselors					
Supervisors/Administrators					

V. DISTRICTWIDE TOTALS BY LANGUAGE

Note: Copy this section as needed if there are ELIGIBLE pupils in more than three languages in your district. In this section, please indicate the districtwide total number of pupils to be served by the program, BY LANGUAGE, grade level, and whether LEP or non-LEP. Include only non-LEP pupils who are being taught in the same classroom as the eligible LEP pupils and by the same teacher (whose FTE is included in Section IV).

Language:

Number of	PK	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
LEP Pupils														
Non-LEP Pupils														

Language:

Number of	PK	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
LEP Pupils														
Non-LEP Pupils														

Language:

Number of	PK	K	1st	2nd	3th	4th	5th	6th	7th	8th	9th	10th	11th	12th
LEP Pupils														
Non-LEP Pupils														

Language:

Number of	PK	K	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th
LEP Pupils														
Non-LEP Pupils														

PI-1849 Page 3

VI. NARRATIVE

Bilingual-Bicultural Program Description

On separate sheets of paper provide a written description of the local bilingual-bicultural program including:

A. Identification and Assessment Process

Please describe the criteria and procedures used to determine eligibility and program placement through **each** of the following four types of assessment. Assessment for:

- 1. **Screening** of native language background other than English;
 - Attach sample of Home Language Survey
- 2. Classification of English Proficiency into one of five levels, PI 13.03(3);
 - List the English Language Proficiency tests, cut off scores and procedures for administering those tests.
 - List the first/native language tests used (if any) and procedures for administering those tests.
- 3. Placement into the appropriate learning experiences; and

4. Monitoring Pupil Progress

• List progress and exit criteria/procedures used to determine pupil improvement in English language ability and readiness to perform ordinary classroom work in English.

Also:

- Describe how qualified personnel of the same linguistic background as the pupil are made available in the assessment process.
- Describe the procedures for monitoring/supporting pupil progress after program exit.

B. Implementation Plans for Preschool, Regular School Year, and Summer School Programs

1. Approach

•	Name the Type of Program your district has chosen to use. If you have more than one type of program in your separate
	vritten narrative, rank order program size with number 1 being largest; number 2, second largest; etc.
	We have a Transitional Bilingual/Content Based Program
	We have an ESL/Content Based Program
	We have an in-the-mainstream-class ESL program
	Our program is a
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- Describe the Instructional Approach(es) for each language and various language proficiency levels. Include in your
 description how the native language of pupils is used in various subject areas, and the time allotments for primary language
 and English instruction in the program.
- Describe the instructional approach and program for LEP pupils who are newly arrived in the U.S. and who have little or no schooling.

2. Goals

- List both the short-term and long-term educational goals for LEP pupils in your program.
- List the bilingual/ESL program improvement goals your district will be working toward.

3. Program Objectives, Activities, and Evaluation

List in outline or chart format the program objectives, the activities designed to achieve those objectives and the planned evaluation for each activity.

4. Other Program Components

- Describe any extended learning opportunities provided for LEP pupils identified as gifted and talented.
- Describe ethnic displays, cultural sensitivity, and representations of cultural diversity in each school that LEP pupils attend.
- Describe how the school district provides adequate, appropriate bilingual/ESL instructional materials for the languages in the district.
- Describe the specific guidelines for identifying LEP pupils with special educational needs.
- Describe methods for contracting with other districts or CESAs, if applicable.
- Describe support services available to LEP pupils, including counseling, language development and tutor or mentor programs.
- Describe coordination with other special programs in the district such as Migrant Education, Title I programs, special education, gifted and talented programs, children at risk programs, etc.

Page 4 PI-1849

VI. NARRATIVE (cont.)

C. Parents and Parental Involvement

- Describe parent notification and written approval of placement procedures. (Include description of how translations are provided.)
- Attach a copy of your parent permission form.
- Describe how parents are notified of their legal right to appeal the district's decision **NOT** to place their child in a bilingual-bicultural program under s. 115.96(5)(b), Wis. Stats.
- Describe the program's Parent Involvement Strategies, including a Parent Advisory Committee (if any) and school-home communication procedures.
- Describe how parents are notified, in their home language if necessary, of the academic progress of their children, and of any
 other school information deemed important for English-speaking parents to know.
- Describe any systematic and ongoing training the program provides for parents and list the specific topics being addressed.

D. Staffing

- Provide the Pupil/Teacher ratio and the Pupil/Staff ratio for your program.
- Describe continuing efforts to recruit bilingual staff.
- Describe methods the local district uses to assure that all staff are appropriately certified.

Describe systematic, ongoing staff development provided to bilingual/ESL staff, aides, regular classroom teachers, support staff, and all other school personnel in contact with LEP pupils.

NOTE: Be sure to include the costs for staff and parents from your district to attend the statewide Bilingual Education Conference or DPI regional conferences.)

- Describe how bilingual counselors are made available for pupils in high school programs.
- Include here (if applicable) "A Request for An Exemption" of the requirement to provide bilingual teachers for all programs under s. 115.97(5)(a-b). Provide evidence of a good faith, continuing effort to recruit bilingual teachers for the language population being served. (Programs for Spanish speaking LEP pupils must provide bilingual teachers.)

E. Length of School Day to be allotted for the Bilingual-Bicultural Program

Provide a description of student hours/periods in the program each day by language and by English-proficiency level.

F. Special Instructional Materials to be used in the Bilingual-Bicultural Program

- Provide a general description and rationale for reimbursable instructional materials, equipment, and supplies requested under this plan of services.
- Provide a description of the method the district uses to assure that all purchases are, in fact, approvable expenditures.

G. Local Means of Evaluating the Bilingual-Bicultural Program

- Describe methods for monitoring pupil progress which are in place as well as procedures for assuring that all staff are aware of them. Pupils must be assessed for academic progress using either standardized testing (i.e., WSAS) or using alternate assessments that are standards-based (see DPI's Standards-Based Alternate Assessment for Limited-English Proficient Students: A Guide for Wisconsin Educators).
- Describe methods for monitoring pupils as they move from one proficiency level to the next and how communication between staff about progress is done regularly.
- Include a list of the pupil records kept.
- Describe the comparisons made between LEP and non-LEP pupils regarding pupil progress, achievement and other indicators of success.
- Describe provisions for conducting follow-up studies on LEP pupils who graduate from the district as a means of obtaining program effectiveness information.
- Describe the procedures the district has established for **annually** measuring the **outcomes** and **effectiveness** of the bilingual/ESL program.
- Describe the process for ongoing program improvement and renewal.
- Summarize the most recent program evaluation results, including summaries of assessments of academic progress.

NOTE: Please attach examples of your evaluation forms.

VII. ONE YEAR BUDGET DETAIL

A. PURCHASED SERVICES

Item Name Includes all items budgeted under Purchased Services Classification (e.g., consultants, travel, staff development costs, field trips, translations, parent involvement activities). Include unit cost and quantity only when applicable. Include brief description if it is not obvious that the item is for instructional purposes to benefit eligible LEP pupils.	Unit Cost	Quantity	Total Cost
obvious that the item is for instructional purposes to benefit eligible LEF pupils.	Offit Cost	Quantity	Total Cost
			\$0

Page 6				PI-1849
	VII. ONE YEAR BUDGET DETAI	L (cont.)		
	B. NON-CAPITAL OBJECTS			
Item Na Include all items budgeted u (such as instructional ma Include unit cost and quantity only when app obvious that the item is for instructional p	ame nder Non-Capital Objects aterials, software, etc.) licable. Include brief description if it is not ourposes to benefit eligible LEP pupils.	Unit Cost	Quantity	Total Cost

TOTAL

\$0

VII. ONE YEAR BUDGET DETAIL (cont.)

C. PERSONNEL SALARY-	-
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		Chec	k here if fringes are in	cluded.			
Name/Code Use the following codes to indicate role of program staff in the column after name					Relevant to	Subj.Code o Bilingual / I Program	
after name T = Teacher A = Assistant C= Counselor Report Supervisor/Administrator Salary on the next page.	License File No.	Code	FTE this person works in the bilingual-bicultural program	Grade Level(s) Served	Position	Subject	Target Language* Population(s) Served by this Teacher or Bilingua Counselor
		:					
		<u> </u>					
		 - - - -					
		! ! !					
		i ! !					
*Target Language Population Codes:				•	•	!	

T=Tibetan **A**= Arabic L= Lao

H= Hmong **M**= Mandarin K= Khmer R= Russian **KO**= Korean **S**= Spanish

For other eligible language population, insert a definable code.

★ Value must be rounded to nearest whole number.

Page 8 PI-1849

VII. ONE YEAR BUDGET DETAIL (cont.)

D. SUPERVISOR/ADMINISTRATOR SALARY—Please see "Instructions" document for who may be included.

Check here if fringes are included.

Supervisor/Administrator Name	FTE this person works in the bilingual- bicultural program	Full-time Salary	Calculate the FTE salary by multiplying the full- time salary by the FTE (the two previous columns)	Calculate the claimable total by multiplying the previous column by 50% Supervisor/Administrators Only
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0
			\$0	\$0

VIII. ONE YEAR BUDGET SUMMARY(s. 115.995; PI 13.07)

SUMMARY

				Budget Modification		
Function	Object	Amount Requested	For DPI Use Amount Approved	Amount Requeste		For DPI Use Amount Approved
1 unction	Object	Requesteu	Amount Approved	Requeste	u	Amount Approved
Instruction	Salaries					
Activities dealing directly with interactions between teachers and pupils. This includes salaries and fringes of aides and appropriately licensed teachers.						
	Fringes					
	Purchased Services					
	Noncapital Objects					
	Noncapital Objects					
	TOTAL Instruction	\$0		\$0		
				ΨΟ		
Support Services	Salaries					
Services which provide administrative, technical, and logistical support to facilitate and enhance instruction.						
	Fringes					
	B					
	Purchased Services					
	Noncapital Objects					
	TOTAL Support Services	\$0	\$0			
	TO TALL Support Solvinso	\$0		ΨΟ		
	TOTAL BUDGET	\$0		\$0		
Signature of DPI Consultant					Date 9	Signed <i>Mo./Day/Yr.</i>
>						